A Model of Knowledge Management for Local Herbal Healers Based on Sufficiency Economy Philosophy in Thailand

Niraj Ruangsan¹, Wichian Sanmee², Bunsong Nasaweang³, Phramaha Mit Thitapañyo⁴, Phramaha Papon Saengyoi⁵

^{1,3} Faculty of Education, ^{4,5} Faculty of Buddhism, Mahachulalongkornrajavidyalaya University, Khon Kaen Campus, ²Faculty of Humanities and Social Sciences, Khon Kaen University

ABSTRACT

Traditional Thai medicine is one of several alternative ways to promote public health in Thailand. In general, it refers to the philosophy, knowledge and methods of practice for health care and illness treatment in line with Thai traditions, culture and the Thai way of life based on the herbal medicines. Today, different techniques are widely used in Nong Don Sub-District, Chaiyaphum Province, Thailand. These techniques are considered as a valuable local wisdom or a body of knowledge known as a tacit knowledge, transmitted from their generations to generations. Sometimes, they disappeared because of the lack of knowledge transmission or knowledge management (KM). In order to preserve this tacit knowledge, there is a need in managing their knowledge. This research therefore aims to develop the model of knowledge management for the herbal healers based on Sufficiency Economy Philosophy (SEP) principles for people in Nong Don Sub-District, Chaiyaphum Province, Thailand. In this study, the qualitative research was used to collect the data from 30 key informants including 30 of herbal healers (10) and community members (20) such as local philosophers, academic scholars and hospital officers. The research tools used in this study were: documentary investigation, in-depth interview, Focus-Group Discussion. After all the research processes, the new model of knowledge management has been created in accordance with the principles of SEP and KM. The model is composed of 1) the principles of the SEP: reasonability, sufficiency, morality, immunity and knowledge as the conceptual guideline of herbal health care practices and TUNA model: Knowledge Vision, Knowledge Sharing and Knowledge Access as the process in preserving the tacit knowledge of the herbalists in the research area. SEP is suitable to use as the moral and ethical guideline of health care practices. It is said the herbal healers should not only be smart but also moral and ethical, consistent with the Regulations of Thai Traditional Medical Council on Ethics of Thai Traditional Medical Profession, 2014. KM of the herbal healing consists of a set of operations that are used by different organizations in order to identify, create, display and spread knowledge for the benefit of use and learning within Nong Don Sub-District. It leads to more efficient information management which is essential for developing the public health in the community. So that it is necessary for the local organizations and stakeholders to have resources allocated to knowledge management in order to preserve and develop the local wisdom.

Keywords

Thai herbs, herbal health care, sufficiency economy philosophy, knowledge management, Thailand

Article Received: 10 August 2020, Revised: 25 October 2020, Accepted: 18 November 2020

I. Introduction

Diseases and health problems affect people physically, mentally, socially and economically, causing stress and suffering. The Office of Policy and Strategy Ministry of Public Health 2020, reported Thai population mortality rate, classified by leading cause of death per 100,000 population, that 125.0 people died from cancers, followed by form cerebrovascular disease/ 53.0 people, lung disease/53.3, inflammation/ 43.7, diabetes/ 25.3, liver disease 17.5, chronic lower respiratory disease/ 14.0, tuberculosis/ 9.3 and AIDS/6.4[1]. Today, people take treatment in many forms. Supported by family members, some patients prefer modern medicine and some alternatively choose Thai traditional medicine. Now, it is accepted that modern medicine alone cannot solve all health problems because of a high-priced

medical system, reliance on medical supplies and medical equipment from abroad. This is an limitation important that prevents modern medicine from serving the people equally and Especially thoroughly[2]. in the countryside, the study of local wisdom in health care using traditional medicine is something that should be considered because in the attitude of the villagers, folk medicine is not completely separate from modern medicine but they support each other [2]. For the use of medicinal herbs as folk wisdom in health care, which Thai ancestors have discovered, accumulated and inherited for a long time, reflecting efforts to seek a sustainable solution to health from the past to present[2]. This is self-reliance which is one of SEP principles. SEP is an important principle used to propel the national development strategies of Thailand in

ISSN: 00333077

pursuit of the goals of the national development: 'A Secure Nation, Contented People, Continued Economic Growth, An Equal Society Sustainable Natural Resources'[3]. Attributed to the King Bhumibol Adulyadej (King Rama IX), the philosophy is promoted by the Government of Thailand and applied to use in many domains of the country development. The philosophy directs the livelihood and behavior of all people at all levels from the family to the community to the country with regarding national development and administration[4]. SEP is also applied to improve the public health as well as evidently appeared in 12th National Economic and Development Plan mentioning that the National Health Development Plan 12 (2017-2021) is propelled by SEP [5].

As mentioned, besides using conventional medicines in promoting public health in Thailand, Thai traditional medicine (TTM) is one of the alternative methods to promote public health. In general, TTM refers to philosophy, knowledge and methods of practice for health care and illnesses treatment in line with Thai traditions, culture and Thai way of life based on the herbal medicines [6]. Using products from herbs in daily life is still in trend in Thai society [7]. In addition, Thai traditional medicine plays an important role in promoting, preventing, treating and restoring the health of the people [7] particularly, in the countryside.

Traditional health care based on the understanding of holistic health as well as physical, mental and social treatment, the use of folk healer wisdom is also essential, especially for people at the grassroots level, who still believe in the traditional healing system. This is to create awareness in the conservation and inheritance of cultural knowledge, providing the community with a healthy and holistic connection as the I-san ancient word 'eat rice mainly, eat vegetables as medicine'[2]. This word also reflects the idea of herbal healing in I-san region. The government of Thailand realizes the importance of this local knowledge and therefore has formulated the Sustainable Natural Resource and Environmental Management Strategy to insert herbal medicines (at least 10% of the total list of medicines) in the National Medicines List in 2013-2017 [8] with the belief that good health of people will boost economic growth of the country directly, indirectly and sustainably.

From the fieldwork survey research and interviews of the local herbal healers in Nong Don Sub-District, Chaiyaphum Province, it is indicated that people in the communities do not have a method to manage the use of herbal wisdom to promote health or even to preserve it. In other words, they do not have knowledge to use medicinal plants because of the idea that it is more difficult than the conventional medicine. To find the solution of this issue, it led to a meeting of community leaders, village board, village health volunteers and related parties such as Subdistrict Administrative Organization and so on. This leads to the meeting agreement that it is necessary to create a model for promoting community health by using the wisdom of local healers with medicinal plants or herbs. Alternatively, the knowledge management model should be created in order to promote the herbal medicine within the communities. Moreover, in consistency with the National Strategy [3], the 12th National Economic and Social Development Plan, the 12th National Health Development Plan [8] where SEP is used in pursuit of the goals of the national development, it led to the meeting agreement that the model should be built based on the principles of SEP. According to the literature review in both Thai scholarly works in Thai Journal Index (Thaijo) [9], and ThaiLIS (Thailand Library Integrated System) [10], SEP has never been applied in creating the knowledge management model for herbal healing practices. In response to the community request and to fill the academic gap left by the former scholarly works. Therefore, this study aims to develop the model of knowledge management for the herbal healers based on SEP principles for people in Nong Don Sub-District.

II. RESEARCH OBJECTIVES

The research methodology involved the interpretative paradigm and aimed to develop the model of knowledge management for the herbal healers based on SEP principles for people in Nong Don Sub-District, Chaiyaphum Province, Thailand. In so doing, the objectives of this research are as follows:

- 1) To analytically study a body of knowledge of herbal heal, SEP and KM principles.
- 2) To develop the KM model for herbal healers based on SEP for people in Nong Don Sub-District, Chaiyaphum Province, Thailand.

III. RESERCH METHODOLOGY

Research Population

The population of this research included 30 of herbal healers (10) and community members (20) such as local philosophers, academic scholars and hospital officers in Nong Don Sub-District, recruited by purposive sampling or by considering their qualifications and backgrounds.

Instruments

In this research, the researchers have employed the Participatory Action Research (PAR) in the research process. The data were collected by means of the following research tools: documentary investigation, in-depth interview and Focus-Group Discussion [11] [12].

Research Methods

The study was divided into 2 Phases:

Phase 1 (Analysis): analytically study the concepts of SEP and KM in the relevant documents, research and academic works, and then study a body of knowledge of herbal healing in the research area.

Phase 2 (Development): develop the KM model for the herbal healers based on SEP in Nong Don Sub-District based on the documentary investigation, in-depth interview and Focus-Group Discussion.

IV. RESEARCH RESULTS

The results of the study of knowledge of herbal healers (35-69 years old) from the document, indepth interviews and issue discussion of 10 folk healers revealed that most of the folk healers are farmers and general employees. The motive for becoming a traditional healer is that they inherited the healing knowledge from their ancestors or family members, including their personal interest in self-treatment or seeking knowledge from ancient herbal medicine texts or I-san ancient texts. The main procedures of treatment of folk are not different: first, they perform teachers' offering, second, disease diagnosis, treatment and finally monitoring and evaluation. Now, the treatment is adapted and integrated with other health care such as western, modern and Chinese medicines. However, most of the healers do not have knowledge about KM. Some said they have never heard it before but they are willing to learn. In response to the question 'how can SEP and KM be used in support their healing practices?', the most informants agreed that SEP and KM should not be complicated in use. The SEP principles: reasonability, sufficiency, morality, immunity and knowledge are suitable to use as the moral and ethical guideline of health care practices. While the Tuna model should be used as the guideline for managing their knowledge. The Tuna model, created by the Knowledge Management Institute Foundation, Thailand is a simple conceptual framework for knowledge management comparing knowledge management as a fish which has three components: head, body and tail. The fish head refers to Knowledge Vision (KV), including the goal, vision, or direction of knowledge management. The body refers to Knowledge Sharing (KS) that is to create a learning atmosphere for people to exchange knowledge with one another. This is the most important part and the most difficult in the knowledge management process. The tail refers to Knowledge Assets (KA) which is a note-taking part to form the accumulated from two important sources: explicit knowledge and tacit knowledge. KM in this section is based on information technology, helping to store and classify the knowledge for easy access, improve knowledge to be up to date as a virtual space for people to share and learn more [13]. Finally, the KM model for healer in Nong Don Sub-District, Chaiyaphum Province is composed of two models: 1) the model to promote health in the community including 4 activities: 1) studying herbs in the community, 2) planting herbs in the community, 3) practicing herbalism and 4) applying SEP in the ethics of Thai tradition medicine; 2) the model to promote the knowledge management including 3 activities: 1) creating knowledge vision, 2) sharing knowledge and 3) creating knowledge assets.

V. DISCUSSION

The study of the knowledge of traditional herbal healers in Nong Don Sub-District reflects the persistence of folk wisdom on health in the changing social conditions with Western health care. The community is harmonious and the citizens help each other and share the knowledge of the community in taking care of each other

when they are sick. The knowledge of medicinal plants is transferred by well-known folk healers in the community. The good treatment of traditional medicinal plants resulted in the promotion of health of the people in the community with herbs. Using herbs to treat illnesses by skilled folk healers makes the community context conducive to the inheritance of folk healers' wisdom in health care, consistent with the works of Jaitea et al (2016) and Phon-ngairm (2018) cited in Kaewarsa and Phon-ngarm [2]. Promoting health in the community with Thai traditional medicine is a holistic health care system including physical, mental, social and environmental. Health care according to the Thai traditional medicine approach covers four main aspects: health promotion. disease prevention, treatment and rehabilitation. This can be applied to benefit daily life of people.

Based on the research result, the herbal healers are farmers and general employees. Although some of them have low education, they have an inspiration to become a traditional healer with the local wisdom inherited from their ancestors or family members. The most important sources of knowledge are ancient herbal medicine texts or Isan ancient texts. This is consistency with the works of Kaewarsa and Phon-ngarm [2] and Lunphe, Sudhisai and Nikornphitaya [14], conducted in Loei and Mahasarakham Provinces. As mentioned above, most of the herbal healers do not have knowledge about KM. To promote and preserve the local wisdom of herbal treatment in area. it requires support from the agencies, governmental community and educational institutions, such as local government organization, local health promoting hospitals district public health office, provincial health office, academics and scholars.

KM of the herbal healing consists of a set of operations that are used by different organizations in order to identify, create, display and spread knowledge for the benefit of use and learning within Nong Don Sub-District. It leads to more efficient information management which is essential for developing the public health in the community. So that it is necessary for the local organizations and stakeholders to have resources allocated for knowledge management in order to preserve and develop the local wisdom. Although, KM models are typically organized according to organizational objectives and intended to achieve

specific results[13], such as to share wisdom, to optimize performance for competitive advantage and increase the level of innovation, in Nong Don Sub-District, the key informants preferred to use the Tuna model as it is easy to use to preserve their explicit and tacit knowledge.

In relations to SEP, the principles: reasonability, sufficiency, morality, immunity and knowledge are suitable to use as the moral and ethical guideline of health care practices. It is said the herbal healers should not only be smart but also moral and ethical, consistent with the Regulations of Thai Traditional Medical Council on Ethics of Thai Traditional Medical Profession, 2014 [15]. SEP theory is created based on the doctrines of Theravada Buddhism as a way of life, integrated understanding of things in daily life, living a life of modesty, fairness and honesty and right livelihood. SEP is a philosophy or concept with principles and ideals that will help the sustainable development of local healers' life through the improvement of self-knowledge for sufficiency. This is consistent with the study of Chumsen [16] mentioning that sufficiency economy is the principle based on goodness, sufficiency and adherence to the Eight Noble Paths or the middle path of life [17] to avoid deceitfulness and create precautions and balance of life. It is very common in Thailand that Buddhist doctrines have been integrated in to developing the quality of life of people as 93.5% of the Thai population are Buddhists [18].

VI. CONCLUSION

This study is an important tool for promoting community health and preserving the traditional wisdom as a base of understanding of holistic health, including physical, mental and social treatment, simultaneously contributing to the knowledge of local herbal healers in the community in the search for health promotion guidelines. The local wisdom with herbs is still necessary, especially for people in the community. The relevant agencies should support and develop knowledge of folk healers to realize the value of resources, create activities that promote health learning with folk wisdom with herbs through KM principles. In addition, local temples are suggested as a base for promoting the health of the people in the community. This will create a learning process, consistent with the way of life of the people in the community, reflecting the promotion

of local community health through self-reliance with nearby herbs. In regards to the KM model for herbal healer in Nong Don Sub-District, Chaiyaphum Province, it is in the second phase of the development. Although this model is approved by all parties in the research, it still needs to be implemented and developed in the research area. Then, the implement results will be evaluated and reported to the public in the future.

VII. ACKNOWLEDGEMENT

In this research, we would like to thank all the key informants: herbal healers, local philosophers, academic scholars and hospital officers for giving such valuable information, and particularly thank to Venerable Phrapalad Surachat Tissaro (Sa-ngounboon) for providing the information related to the study and arranging the facilities in the research.

REFERENCES

- [1] Strategy and Planning Division, Public Health Statistics A.D. 2019. 2019, Ministry of Public Health: Bangkok.
- [2] Kantida Kaewarsa, P.P.-n., Development of Community Health Promotion Model Using Local Wisdom on Herbs: A Case Study at Ban Na Dok Kham, Na Duang District, Loei Province. Journal of Community and Life Quality, 2017. 7(2): p. 144-155.
- [3] Office of the National Economic and Socail Development Council. National Strategy. 2020 [cited 2020 22/10/2020]; Available from: http://nscr.nesdb.go.th/wp-content/uploads/2019/10/National-Strategy-Eng-Final-25-OCT-2019.pdf.
- Wansu, D.L., [4] Amnaj Supawan Wongkumchan, Thavajchai Sakpuram, Strategy Development for Economic of Status Elevation Sri-utumporn Community Based on Sufficiency Economy Philosophy through Systematic Approach. Mediterranean Journal of Social Sciences, 2012. 3(11): p. 483-488.

- [5] Ministry of Public Health, National Health Plan 12 (2017-2021). 2016, Bangkok: Ministry of Public Health.
- [6] Thai Traditional Medicine and Thai Herbal. Thai Traditional Medicine. 2010 [cited 2021 27/01]; Available from: http://ttmnth.blogspot.com/2013/07/thaitraditional-medicine.html.
- [7] Department of Thai Traditional and Alternative Medicine, Knowledge Market of Thai Traditional and Alternative Medicine. 2018, Bangkok: Department of Thai Traditional and Alternative Medicine.
- [8] Ministry of Public Health, Strategic Plan for Health Service Development, Provincial Health Plan: CUP. 2013, Nonthaburi: Ministry of Public Health.
- [9] Thai Journal Online. Search. 2020 [cited 2020 21/01]; Available from: https://www.tci-thaijo.org/.
- [10] ThaiLIS sss Digital Collection Working Group. Search. 2021 [cited 2021 27/01]; Available from: https://tdc.thailis.or.th/tdc/basic.php.
- [11] Krueger, R.A. Designing and Conducting Focus Group Interviews. 2002 [cited 2021 21/01]; Available from: https://www.eiu.edu/ihec/Krueger-FocusGroupInterviews.pdf.
- [12] Urwongse, K., Focus Group Dicussion: Effectiveness Qualitative Data Collection Technique. STOU Education Journal, 2018. 12(1): p. 17-30.
- [13] The Knowledge Management Institute Foundation. Knowledge Management. 2021 [cited 2021 28/01]; Available from: https://kmi.or.th/kmknowledge/.
- [14] 14. Tippa Lunphe, W.S., Saowaluk Nikornphitaya,, The Folk Doctor Local Knowledge Pattern in Herbs of Mahasarakam Province. Journal of Graduate Studies Review Nakhonsawan Buddhist College, 2019. 7(2): p. 01-16.
- [15] Walailak University. The Regulations of Thai Traditional Medical Council on Ethics of Thai Traditional Medical Profession, 2014. 2521 [cited 2021

- 28/01]; Available from: https://dla.wu.ac.th/elaw/2327/.
- [16] Chatree Chumsen, Sufficiency Economy Study in Suttantapitaka of Theravada Buddhism. Mahachula Academic Journal, 2018. 5(2): p. 64-78.
- [17] Payutto, P.A., Dictionary of Buddhism. 2002, Sahadhammika Press: Bangkok.
- [18] National Statistical Office. A Survey Result of Social, Cultural Status and Mental Health 2018. 2018 [cited 2021 21/01]; Available from: http://www.nso.go.th/sites/2014/Pages/News/2561/N21-09-61-1.aspx.